



04-30-07

EXPRESS MAIL NO. EV889152925US

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TRANSMITTAL FORM

(To be used for all correspondence
after initial filing)

Application Number	10/727,138
Filing Date	December 3, 2003
First Named Inventor	Kaushik Saha
Art Unit	2193
Examiner Name	Chat C. Do
Attorney Docket No.	852463.406

ENCLOSURES (check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance
<input checked="" type="checkbox"/> Fee Attached	<input type="checkbox"/> Request for Corrected Filing	<input type="checkbox"/> Communication to TC
<input checked="" type="checkbox"/> Amendment/Response	<input type="checkbox"/> Receipt	<input type="checkbox"/> Appeal Communication to
<input type="checkbox"/> After Final	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Board of Appeals and
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Petition	<input type="checkbox"/> Interferences
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Petition to Convert to a	<input type="checkbox"/> Appeal Communication to
<input type="checkbox"/> Express Abandonment	<input type="checkbox"/> Provisional Application	<input type="checkbox"/> TC (Appeal Notice, Brief,
Request	<input type="checkbox"/> Power of Attorney,	<input type="checkbox"/> Reply Brief)
<input type="checkbox"/> Information Disclosure	<input type="checkbox"/> Revocation, Change of	<input type="checkbox"/> Proprietary Information
Statement and Transmittal	<input type="checkbox"/> Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Cited References	<input type="checkbox"/> Declaration	<input checked="" type="checkbox"/> Return Receipt Postcard
<input type="checkbox"/> Certified Copy of Priority	<input type="checkbox"/> Statement under 37 CFR	<input type="checkbox"/> Other Enclosure(s) (please
Document(s)	<input type="checkbox"/> 3.73(b)	identify below):
<input type="checkbox"/> Response to Missing Parts	<input type="checkbox"/> Terminal Disclaimer	<hr/>
under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Request for Refund	<hr/>
<input type="checkbox"/> Response to Missing	<input type="checkbox"/> CD, Number	<hr/>
Parts/Incomplete Application	<input type="checkbox"/> of CD(s)	<hr/>
	<input type="checkbox"/> Landscape Table on CD	

Remarks

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number 38106
Signature		
Printed Name	Timothy L. Boller	
Date		Reg. No. 47,435

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature		
Typed or printed name		Date:

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).

APR 26 2007

**FEES TRANSMITTAL
For FY 2007**

Complete if Known

Application Number	10/727,138
Filing Date	December 3, 2003
First Named Inventor	Kaushik Saha
Examiner Name	Chat C. Do
Applicant claims small entity status. See 37 CFR 1.27	Art Unit 2193
TOTAL AMOUNT OF PAYMENT (\$200)	Attorney Docket No. 852463.406

METHOD OF PAYMENT (check all that apply)
 Check Credit Card Money Order Other (please identify): _____

 Deposit Account Deposit Account Number: 19-1090 Deposit Account Name: Seed IP Law Group PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

<input type="checkbox"/> Charge fee(s) indicated below	<input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee
<input type="checkbox"/> Charge any additional fee(s) or underpayments	<input checked="" type="checkbox"/> Charge any underpayments or credit any overpayments of fee(s) under 37 CFR 1.16 and 1.17

Warning: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
	Small Entity		Small Entity		Small Entity		
Application Type	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fee (\$)	Fees Paid (\$)
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Provisional	200	100	0	0	0	0	_____

2. EXCESS CLAIM FEES**Fee Description**

		Small Entity	Small Entity	Small Entity
Each claim over 20 (including Reissues)				50 25
Each independent claim over 3 (including Reissues)				200 100
Multiple dependent claims				360 180

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
20 -20 or HP = 0 X 50 = 0						

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)
4 -3 or HP = 1 X 200 = 200			

HP = highest number of independent claims paid for, if greater than 3.

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

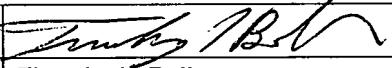
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
-100 = _____	/50 = _____	(round up to a whole number)	x	_____

4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount) _____

Other (e.g., late filing surcharge): _____

SUBMITTED BY

Signature		Registration No. (Attorney/Agent)	47,435	Telephone	206-622-4900
Name (Print/Type)	Timothy L. Boller			Date	April 26, 2007



EXPRESS MAIL NO.: EV889152925US

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Kaushik Saha et al.
Application No. : 10/727,138
Filed : December 3, 2003
For : LINEAR SCALABLE FFT/IFFT COMPUTATION IN A MULTI-
PROCESSOR SYSTEM

Examiner : Chat C. Do
Art Unit : 2193
Docket No. : 852463.406
Date : April 26, 2007

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT

Commissioner for Patents:

In response to the Office Action dated January 26, 2007, please amend the application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Amendments to the Abstract begin on page 6 of this paper.

Remarks begin on page 7 of this paper.

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